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Bib Data Sheet

CONFIRMATION NO. 8392

<b>SERIAL NUMBER</b> 09/682,351	<b>FILING DATE</b> 08/23/2001 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2151	<b>ATTORNEY DOCKET NO.</b>
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## APPLICANTS

Eric Schneider, University Heights, OH;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A CIP OF 09/682,133 07/25/2001  
AND A CIP OF 09/653,100 08/31/2000  
AND A CIP OF 09/650,827 08/30/2000  
AND A CIP OF 09/598,134 06/21/2000  
AND A CIP OF 09/532,500 03/21/2000  
AND A CIP OF 09/525,350 03/15/2000  
WHICH CLAIMS BENEFIT OF 60/175,825 01/13/2000  
AND CLAIMS BENEFIT OF 60/160,125 10/18/1999  
AND CLAIMS BENEFIT OF 60/157,075 10/01/1999  
AND CLAIMS BENEFIT OF 60/143,859 07/15/1999  
AND CLAIMS BENEFIT OF 60/135,751 05/25/1999  
AND CLAIMS BENEFIT OF 60/130,136 04/20/1999  
AND CLAIMS BENEFIT OF 60/125,531 03/22/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None* *AD* *1/14/04*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 08/31/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 47	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature <i>AShok</i> Initials <i>AD</i>				

## ADDRESS

24226

## TITLE

Fictitious domain name method, system, product, and apparatus

<b>FILING FEE RECEIVED</b> 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit